

# NORTH CAROLINA DEPARTMENT OF PUBLIC SAFETY

## Alcoholism and Chemical Dependency Programs

### Authorization for Release of Information

I, \_\_\_\_\_, OPUS# (optional): \_\_\_\_\_, DOB: \_\_\_\_\_

Authorize NCDPS – Alcoholism and Chemical Dependency Programs to release to:

Name/Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

The following information from my substance abuse treatment record.

### Substance Abuse Treatment Completion (to include Program Name, Location, and Dates)

Name: \_\_\_\_\_ Location: \_\_\_\_\_

Dates: \_\_\_\_\_ to \_\_\_\_\_

The above information is released solely for the following purpose(s): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any other use of the disclosed information is forbidden.

**I understand that my records are protected under the Federal Confidentiality Regulations and cannot be disclosed without my written consent unless otherwise provided for in those Regulations. This consent is subject to revocation at any time except to the extent that action has already been taken in reliance thereon.**

This consent shall expire upon the following date, event, or condition:

**“One Year From Signature (can be revoked at any time upon request)”**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Signature of Parent, Guardian, or Personal Representative if offender is a minor,**

**incompetent, or deceased:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### **NOTICE TO ACCOMPANY DISCLOSURE**

Prohibition of redisclosure: This information has been disclosed to you from records protected by Federal Rules (**42 CFR part 2**). The Federal Rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by **42 CFR part 2**. A general authorization for release of medical or other information is **NOT** sufficient for this purpose. The Federal Rules restrict any use of the information to criminally investigate or prosecute any alcohol abuse patient.